

# COMING HOME

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- We are all different and unique
- We all process major life events differently and uniquely
- No two individuals or families are completely alike
- Each individual and family will find their way home differently.
- Each family member will have different expectations for the homecoming.

- Most soldiers and families reunite with a minimum of significant problems. Time, patience, and understanding are key.
- Most do experience a transition period
- This is *normal* and expected.
- The transition period is brief for some, more prolonged for others.
- Mixed emotions/ ambivalent feelings often run high during the transition period. This is *normal*.

- The “honeymoon “ period may last a few hours, days, weeks...it depends. This is *normal*.
- Changes likely have occurred in the deployed soldier, spouse, children. Also, changes in roles or functions esp. authority within the home.
- Talking openly about these changes will help everyone understand them better and alleviate fears/ misunderstandings.
- Re-establishing of connectedness to others will occur at different rates for each individual. This is *normal*.

- The realities of being home sometimes don't match-up to the long awaited expectations and excitement build-up...may seem like a let down. Life may seem more mundane. This is *normal*.
- Problems that existed in a family prior to deployment often reappear after the return home.
- The returning soldier may seem preoccupied with the deployment experience. They may be unable/ reluctant to talk about it ( some talk excessively about it). This is *normal*.

# Normal Experiences After Return Home

- Increased awareness of ones environment....notice things more.
- More careful driving.
- Greater appreciation of life.
- Less materialistic
- Broader world view
- More mature
  
- Sleep cycle out of sync initially
- Transient insomnia/ occasional nightmare ( not recurring)/ mild increase in restlessness during sleep.
- Mildly increased sensitivity to noises/ visual images
- Thinking often about the deployment = mental decompression= self-debriefing.
- May seem aloof for brief periods of time.

# Abnormal Experiences

- If ANY of these are present, signals a *serious* problem may exist . If ANY present should seek help by a trained mental-health professional
- Suicidal thoughts or homicidal thoughts
- Violent thoughts of any kind
- Disturbing thoughts or difficulty controlling thoughts
- Persistent irritability and most especially *outward-directed irritability*.
- Persistent sadness or feelings of hopelessness
- Progressively worsening insomnia

- Recurring nightmares
- Fitful sleep ( kicking/punching) or thrashing of bed ( bedding removed in process).
- Awakening startled/ frightened from sleep
- Onset of panic attacks ( awake or while asleep)



- Feeling numb / detached from others or self. Family, friends or colleague's tell you this is how you appear
- Increased use of alcohol or use of illicit drugs
- Persistent avoidance of public places ( shopping malls/ supermarket ect..) especially if normal routines are altered as a result
- Onset of flashbacks or any perceptual disturbances of any kind

# Resources

- Hospital Chaplain Ph 544-3864
- Deployment Cycle Care Managers Ph 544-4418
- Social Work Services Ph 545-1661
- Alcohol and Drug Counseling Center Ph 545-8362
- Chaplain Family Life Center Ph 545-1760
- Outpatient Mental Health Service Ph 544-3590
- Army One Source Ph 1-800- 464-8107
- Your Primary Care Provider
- Emergency Room Ph 544-1123
- National Center For PTSD---[ncptsd.org](http://ncptsd.org). Very useful internet site with information for soldiers and families. See “Homecoming After Deployment: Dealing with Changes and Expectations.”

Questions ??